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Sara Green (Dependent's Name)  
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<b>AFFIDAVIT</b>	<b>FILING DATE</b>	<b>FIRST NAMED INVENTOR</b>	<b>ATTORNEY DOCKET NO.</b>	<b>CONFIRMATION NO.</b>
FILED	02/20/2004	Mitch Jenkins	015714.0033US1	7619

APPLICANT	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(3) DUE	DATE DUE
Applicant's name	YES	\$700	\$300	<del>\$1000</del> #1009.00	07/18/2006
	EXAMINER	ART UNIT	CLASS-SUBCLASS		
CLASSIFICATION	3732	132-322000			

<p>1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.364)</p> <p><input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form, PTO/SF 122) attached</p> <p><input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SF 122, if it is a name recent) attached. Use of a Customer Number is required</p>	<p>2. For printing on the patent front page, list</p> <p>(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,</p> <p>(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.</p>	<p><u>Rutan &amp; Tucker, LLP</u></p> <p>2 _____</p> <p>3 _____</p>
<p>3. ASSIGNMENT AND ANTECEDENT RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)</p>		
<p>PLEASE PRINT. If an assignee is identified below, no assignor data will appear on the patent. If an assignor is identified below, the document has been filed for recordation. See 37 CFR 1.311. Completion of this form is NOT a substitute for filing an assignment.</p>		
<p>(A) NAME OF ASSIGNEE</p>	<p>(B) RESIDENCE (CITY AND STATE OR COUNTRY)</p>	

Please check the appropriate domestic category of companies (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4b. The following information is enclosed:  
☒ Form 1.  
☒ Publication 5010 (Non-prosecution disposition permitted).  
☒ Address change. 3

4c. Payment of Fee(s).  
☐ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2018 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credits any overpayment to Deposit Account Number 507191 (enclose an extra copy of this form).

5. Change in entity status (if status indicated above)  
☐ a. Applicant is claiming SMALL ENTITY status. See 37 CFR 1.27.  
☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(e)(2).

**NOTE:** The Data Bank of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  
Interest in the Invention and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown in the records of the United States Patent and Trademark Office.

Amidon, 10.8 0.2. 1000.

Typed as [redacted]

Date 6/14/00

Registration No. **23881**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application for a patent as governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the required information. This information is required to file an application for a patent. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form should be submitted to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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